

## PART B - FEE(S) TRANSMITTAL

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23910  
**Fliesler Meyer LLP**  
**650 California Street, 14th Floor**  
**San Francisco, CA 94108**

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the **Mail Stop ISSUE FEE** address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Michael L. Robbins	(Depositor's name)
/Michael L. Robbins/	(Signature)
September 10, 2007	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/772,521	02/05/2004	Kyle Stickle	ANRI-08067US0	5395

**TITLE OF INVENTION:**

**METHOD OF AND APPARATUS FOR MEASURING JITTER AND GENERATING AN EYE DIAGRAM OF A HIGH SPEED DATA SIGNAL**

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
Nonprovisional	No	\$1400	\$300	\$0	\$1700	10/05/2007
EXAMINER		ART UNIT			CLASS-SUBCLASS	

Rahman, Fahmida 2116 713/400

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. **Use of a Customer Number is required.**

2. For printing on the patent front page, list  
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
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1 **Fliesler Meyer LLP**

2 \_\_\_\_\_

3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

**ANRITSU COMPANY**

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**MORGAN HILL, CALIFORNIA**

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

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Issue Fee  
 Publication Fee (No small entity discount permitted)  
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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 06-1325 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature /Michael L. Robbins/

Date September 10, 2007

Typed or printed name Michael L. Robbins

Registration No. 54,774

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